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AUG 29 2008  
 PTO-85  
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52889 7590 05/30/2008

**ROBERT R. PRIDDY**  
**LAW OFFICE OF ROBERT PRIDDY**  
**13511 QUERY MILL ROAD**  
**N. POTOMAC, MD 20878**

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(Depositor's name)  
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 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/667,893	09/23/2003	Thomas E. Jenkins	3085-004	8199

TITLE OF INVENTION: CONTROLLING WASTEWATER TREATMENT PROCESSES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	09/02/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
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BARRY, CHESTER T	1797	210-603000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> Robert R. Priddy

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advanced Aeration Control, LLC

Racine, Wisconsin

09/02/2008 EPOINGU1 00000071 10667893

01 FC:1501 1440.00 OP

02 FC:1501 300.00 OP

03 FC:8001 30.00 OP

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Robert R. Priddy

Date August 26, 2008

Typed or printed name Robert R. Priddy

Registration No. 20,169

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"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert R. Priddy

2 \_\_\_\_\_

3 \_\_\_\_\_

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Racine, Wisconsin

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Authorized Signature Robert R. Priddy

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